

REPORT SURVEY		1. DATE OF SURVEY	2. TYPE OF REPORT	
3. PERSON TO CONTACT REGARDING REPORT	NAME [REDACTED] 25X1A9a	3 November 1955 COMPONENT General Counsel	REQUIRED	<input checked="" type="checkbox"/> PREPARED
4. REPORT TITLE		Foreign Travel under Area Familiarization and Survey Programs		
5. AUTHORITIES OR DIRECTIVES REQUIRING THIS REPORT				
DCI		FM 22-510-1		
6. REPORTING FREQUENCY (Daily, weekly, monthly, as situations occur, etc.)  Semi-annual		7. REPORT FORMAT (Form no., memorandum, machine tabulation, etc.)  Memorandum		
8. DATE REPORT IS DUE  1 June - 1 December		9. NUMBER OF REPORTS RECEIVED/PREPARED ANNUALLY IF REPORT IS A "SITUATION" REPORT		
10. OFFICES OR ACTIVITIES REQUIRED TO SUBMIT THIS REPORT  All Agency components		11. DISTRIBUTION OF THIS REPORT  ORIGINAL: DD/S COPIES: General Counsel		
12. ESTIMATE OF THE NUMBER OF MAN HOURS REQUIRED TO PREPARE THIS REPORT ONE TIME. INCLUDE MAN HOURS REQUIRED AT ALL LEVELS TO MAINTAIN RECORDS, COLLECT DATA, PREPARE FEEOR REPORTS, AND COMPILE THE FINAL REPORT.		1 hour		
13. COMPLETE THE FOLLOWING AS APPROPRIATE TO EITHER A "REQUIRED" OR "PREPARED" REPORT, OR BOTH, USING SPACE 14 IF NECESSARY.		YES	NO	
A. DOES THIS REPORT DUPLICATE IN WHOLE OR IN PART ANY OTHER REPORT? IF SO PLEASE EXPLAIN.				
B. IS THE INFORMATION REPORTED IN MORE DETAIL, SUBMITTED MORE FREQUENTLY, OR GIVEN WIDER DISTRIBUTION THAN IS CONSIDERED NECESSARY TO SERVE THE PURPOSES FOR WHICH THE REPORT WAS ESTABLISHED?				<input checked="" type="checkbox"/>
C. IS THIS REPORT THE RESULT OF AN ADMINISTRATIVE OR PROCEDURAL PROBLEM WHICH SHOULD BE CORRECTED RATHER THAN REPORTED ON?				<input checked="" type="checkbox"/>
D. COULD THE PURPOSES OF THIS REPORT BE SERVED BY DIRECT SUPERVISION OR INSPECTION, OR BY BRIEFINGS, STAFF MEETINGS, ETC.?				<input checked="" type="checkbox"/>
E. HAS OFFICE ROUTINE EVER BEEN DISRUPTED OR HAS OVERTIME EVER BEEN REQUIRED TO MEET THE SUBMISSION DATE FOR THIS REPORT?				<input checked="" type="checkbox"/>
F. DO YOU RECOMMEND THAT THE FORM OR FORMAT OF THIS REPORT BE REVISED WITH RESPECT TO:  (1) SPACING? . . . . . (2) WEIGHT OF PAPER? . . . . . (3) POSSIBLE ELIMINATION OF TRANSMITTAL CORRESPONDENCE? . . . . .				<input checked="" type="checkbox"/>
G. IF THE REPORT IS REPRODUCED BY MIMOGRAPH, DITTO, MULTILITH, ETC., DO YOU RECOMMEND THE PROCUREMENT OF REPRODUCIBLE MASTERS WITH HEADINGS, LINES, ETC., PREPRINTED THEREON TO EXPEDITE PREPARATION OF THE REPORT?				<input checked="" type="checkbox"/>
H. WOULD YOUR OFFICE DISCONTINUE:  (1) MAINTAINING . . . . . (2) COMPILING . . . . .				<input checked="" type="checkbox"/>
THE DATA BEING SUBMITTED IN THIS REPORT IF THE REQUIREMENT OF THE FORM IS NOT MET, IS IT PREPARED FOR RELEASE? <input checked="" type="checkbox"/>				

14. REMARKS (If you approve this report, briefly state its purpose and fully justify its continuance. State any contemplated action for continuing the report. Consider changes in conditions since the report was established. If you prepare this report, furnish a general opinion of its value. Cite any evidence or lack of evidence that the report is worth its cost. Recommend any improvements, including methods for preparing and submitting the report.)

CONTINUED ON SEPARATE SHEET

REVIEW BY CHIEF OF COMPONENT

RECOMMENDATIONS

CONTINUED ON SEPARATE SHEET

DATE	TITLE	SIGNATURE
7 Nov 1955	LAWRENCE R. HOUSTON General Counsel	/S/